APPLICATION FOR CATHOLIC SCHOOL CHILDREN FOR RECEPTION OF THE SACRAMENTS OF FIRST PENANCE AND FIRST EUCHARIST

Fee: $20.00 Make check payable to Most Blessed Sacrament.

Please print or type all application information. Do NOT use nicknames or abbreviations.

Child's Name: _____
Last First Middle

Address: _____
Street City/State/Zip

Telephone _____ Grade _____ Age _____

School Presently Attending: _____

RECORD OF BAPTISM

** Complete name and address of Church of Baptism is required.*

Church of Baptism _____

Address: _____
Street City/State/Zip

Date of Baptism: _____
If the child's name was different at the time of baptism, please indicate here:
_____

**** Note:*** *If the child was not baptized at Most Blessed Sacrament, a copy of the baptismal certificate must accompany this application form. Please make sure the church's address is on the baptismal certificate. Notify the PSR office if there will be a delay in obtaining a copy of the baptismal certificate.*

RELIGIOUS EDUCATION RECORD:

This child has attended religious education classes at:

Grade 1: _____
Name/Address of parish program or Catholic school

Grade 2: _____
Name/Address of parish program of Catholic school

FAMILY RECORD

Father's Name: _____
First Middle Last

Mother's **MAIDEN** Name: _____
First Middle MAIDEN NAME